ł	•	•	Application or Docket Number									
	PATENT APPLICATION FEE DETERMINATION RECO								10-7	177	38	
Effective October 1, 2003 2596 USIT												•
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL TYPE	ENTITY			RTHAN
F	OTAL CLAIMS	3	1 10		100	uiiii 2)	L			OR		ENTITY
								RATE		-	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FI	EE 385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			/7 minus 20=		• 8			X\$ 9=		OR	X\$18=	
II—	DEPENDENT C		1 minus 3 =		C			X43=		OR	X86=	
М	JLTIPLE DEPE	NDENT CLAIM F	RESENT					+145=		OR	+290=	
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL		OR	TOTAL	720
CLAIMS AS AMENDED - PART II							OTHER THAN					
		(Column 1)		(Colun		(Column 3)		SMALI	LENTITY	OR	SMALL	ENTITY
AMENDMENT A	6-2405	. CLAIMS REMAINING . AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	• 9	Minus	- 21	כ	= /		X\$ 9=	/	OR	X\$18=	1
	Independent	* 2 ENTATION OF M	Minus	PENDENT	CI AIM	= /		X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=	1.	OR	+290=	/
								TOTAL		OR	TOTAL ADDIT, FEE	
	(Column 1) (Column 2) (Column 3)							DD11.1 C			, , , , , , , , , , , , , , , , , , ,	
ENT B		CLAIMS REMAINING		HIGHE		PRESENT EXTRA		RATE	ADDI-	IAL.	RATE	ADDI-
		AFTER AMENDMENT		PREVIO	USLY				TIONAL FEE			TIONAL FEE
AMENDMENT	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Ind pendent	<u> </u>	Minus .	.***		=		X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=	1.	OR	+290=	
			•				L	TOTAL		į į	TOTAL	.
	•							DDIT. FEE		OR ,	ADDIT. FEE	
	`	(Column 1)		(Colum						; \ •		
AMENDMENT C		REMAINING AFTER AMENDMENT		NUMBI PREVIOL PAID F	ER JSLY	PRESENT · EXTRA		RATE	ADDI- TIONAL FEE	·	RATE	ADDI- TIONAL FEE
NON	Total		Minus	**		•		X\$ 9=		OR	X\$18=	•
ME	Independent		Minus	***				X43=			X86=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM												.
* H	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+290=	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										OR A	DOIT. FEE	
1	he "Highest Num	ber Previously Paid	f For" (Total or	Independen	t) is the	highest number	found	d in the ap	propriate box	in col u	ımn 1.	